

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>RGA RIGHT DIRECTION PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00490730
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee <b>McCleskey Media Strategies</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 19 / 2016</b>
Mailing Address <b>6100 Uptown Blvd NE, #590</b>		Amount <b>15000.00</b>
City <b>Albuquerque</b>	State <b>NM</b>	Zip Code <b>87110</b>
Purpose of Expenditure <b>Advertising - Production (Estimate)</b>	Category/Type <b>004</b>	Transaction ID : <b>SE.4785</b> Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <b>0.00</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>SRCP Media, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>09 / 19 / 2016</b>
Mailing Address <b>201 N Union St, Suite 200</b>		Amount <b>217066.70</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>
Purpose of Expenditure <b>Television Advertising - Media Placement</b>	Category/Type <b>004</b>	Transaction ID : <b>SE.4783</b> Date of Disbursement or Obligation MM / DD / YYYY <b>09 / 15 / 2016</b>
Name of Federal Candidate <b>HILLARY RODHAM CLINTON</b>		Office Sought: <input type="checkbox"/> House District: <b>00</b> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <b>2099189.50</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>232066.70</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>232066.70</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael Adams

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 20 / 2016**

Signature